

CITY OF WATERTOWN, NEW YORK
2004 Mileage and Expense Reimbursement For Travel

Department _____

Charge Code _____

Date(s)	Description/Reason
	<div style="margin-bottom: 5px;">Beginning Odometer Reading _____</div> <div style="margin-bottom: 5px;">Ending Odometer Reading _____</div> <div style="margin-bottom: 10px;">Total Miles Traveled _____ @ \$.375 \$ _____</div> <div style="margin-bottom: 20px;">Total Reimbursement _____ \$ _____</div> <div style="margin-bottom: 10px;">_____ Employee's Signature</div> <div style="margin-bottom: 10px;">Reimbursement check payable to: _____</div> <div style="margin-bottom: 10px;">Address: _____</div> <div style="margin-bottom: 10px;">_____</div> <div style="margin-bottom: 10px;">_____</div>

TO COMPTROLLER'S DEPARTMENT:

You are hereby authorized to issue a reimbursement check for the above amount to the above mentioned employee for mileage and/or expense reimbursement for travel.

Department Head